Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		ÖR	OTHER	
TOTAL CLAIMS			92				Γ	RATE	FEE]	RATE	FEE
FOR			NUMBER	FILED	NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	92/mir	านร 20=	· Q2			X\$ 9=		OR	X\$18=	1294
INDEPENDENT CLAIMS			/ mi	nus 3 =	* i			X43=			X86=	alle
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT		· · · · ·		+			OR		700
* If the difference in column 1 is less than zero, enter "O" in column 2								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	ĺ	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
							L	TOTAL		OB	TOTAL	
ADDIT. F (Column 1) (Column 2) (Column 3)											ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	<u>-</u>	=		X43=	-	OR	X86=	
	FIRST PRESE	NTATION OF ML	JLTIPLE DEP	PENDENT	CLAIM			+145=		OR	+290=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total ·	*	Minus	**	· •	= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	_	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		1	000	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
**	f the "Highest Nur f the "Highest Nu	mber Previously Pa mber Previously Pa ber Previously Paid	id For [*] IN THIS aid For" IN THIS	S SPACE is S SPACE is	less than less than	20, enter "20." n 3, enter "3."	70	TOTAL DOIT. FEE			TOTAL ADDIT. FEE Jimn 1.	